

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	HOUSING FOR ELECTRONIC DEVICE WEARABLE ON USER'S FINGER
Attorney Docket Number::	244707US17
Total Drawing Sheets::	13

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	United States
Status::	FULL CAPACITY
Given Name::	Kai
Family Name::	Marcucelli
City of Residence::	Needham
State or Province of Residence::	Massachusetts
Country of Residence::	United States
Street of Mailing Address::	c/o Fila Sport, Inc. 83 Pine Street
City of Mailing Address::	Peabody
State or Province of Mailing Address::	Massachusetts
Country of Mailing Address::	United States
Postal or Zip Code of Mailing Address::	01960

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY
Given Name:: Craig
Family Name:: Wojcieszak
City of Residence:: Lee
State or Province of Residence:: New Hampshire
Country of Residence:: United States
Street of Mailing Address:: c/o Fila Sport, Inc.
83 Pine Street
City of Mailing Address:: Peabody
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 01960

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY
Given Name:: Edward
Middle Name:: C.
Family Name:: Frederick
City of Residence:: Brentwood
State or Province of Residence:: New Hampshire
Country of Residence:: United States
Street of Mailing Address:: c/o Fila Sport, Inc.
83 Pine Street
City of Mailing Address:: Peabody
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 01960

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	119(e) of	60/456,549	03/24/03

ASSIGNMENT INFORMATION

Assignee Name:: Fila Luxembourg S.A.R.L.
 Street of Mailing Address:: 46/A Avenue J. F. Kennedy
 City of Mailing Address:: Luxembourg
 Country of Mailing Address:: Luxembourg
 Postal or Zip Code of Mailing Address:: L-1855